

Application Data Sheet

Application Information

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks::
Number of copies of CDs::
Sequence Submission::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: SYSTEMS AND METHODS FOR
OVERCOMING STITION
Attorney Docket Number:: 19930-002800
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 14
Small Entity?:: Yes
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

5
5
3
0
3
0
3
0
3
0
3
0
3
0
3
0
3
0

Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name::
Family Name:: Miller
Name Suffix::
City of Residence:: Louisville
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 1035 South Boulder Road, #115
City of Mailing Address:: Louisville
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80027

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Lilac
Middle Name::
Family Name:: Muller
Name Suffix::
City of Residence:: Nederland
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 241 Alpine
City of Mailing Address:: Nederland
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80466

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Robert
Middle Name:: L.
Family Name:: Anderson
Name Suffix::
City of Residence:: Boulder
State or Province of Residence:: CO
Country of Residence:: US
Street of Mailing Address:: 1011 Rainbow Way
City of Mailing Address:: Boulder
State or Province of mailing address:: CO
Country of mailing address::
Postal or Zip Code of mailing address:: 80303

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Designation:: Primary	Representative Number:: 28,572	Representative Name:: David N. Slone
Associate	47,629	Douglas M. Hamilton

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

Foreign Priority Information

Country:: Application number:: Filing Date::

Assignee Information

Assignee Name:: Network Photonics, Inc.
Street of mailing address:: 4775 Walnut Street, Suite C
City of mailing address:: Boulder
State or Province of mailing address:: Colorado
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 80301

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